

Form approved.
Budget Bureau No. 42-R355.5.

DE

~~Note New Address~~

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☒ DRY ☐ Other _____

b. TYPE OF COMPLETION: NEW WELL ☐ WORK OVER ☒ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____

2. NAME OF OPERATOR
El Paso Natural Gas Company

3. ADDRESS OF OPERATOR
P.O. Box 289, Farmington, NM 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)

At surface 1185'N, 1575'W

OIL CON. COM

At top prod. interval reported below

At total depth

14. PERMIT NO.	DATE ISSUED
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12. COUNTY OR PARISH San Juan	13. STATE New Mexico
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15. DATE SPUDDED 17-77	16. DATE T.D. REACHED 8-24-77	17. DATE COMPL. (Ready to prod.) 9-26-77 4-21-81	18. ELEVATIONS (DF, R&B, RT, GR, ETC.) * 6144' GL	19. ELEV. CASINGHEAD
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20. TOTAL DEPTH, MD & TVD 5600'	21. PLUG, BACK T.D., MD & TVD 5583'	22. IF MULTIPLE COMPL., HOW MANY* 2	23. INTERVALS DRILLED BY →	ROTARY TOOLS 0-5600'	CABLE TOOLS
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24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*	25. WAS DIRECTIONAL
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4405-5513' (MV) 2896-2992' (PC)

26. TYPE ELECTRIC AND OTHER LOGS RUN	27. WAS WELL CORED
Gamma-Ind; CDL-GR; Temp. Survey	No

28. CASING RECORD (*Report all strings set in well*)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
9 5/8"	32.3#	249'	13 3/4"	225 cf.	
7"	20#	3260'	8 3/4"	469 cf.	

29. LINER RECORD					30. TUBING RECORD		
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
4 1/2"	3099'	5600'	423 cf		2 3/8"	5490	3075'
					1 1/4"	2977'	

31. PERFORATION RECORD (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
05-13, 4453-59, 4503-09, 4525-32, 4559- 4636-79, 4705-25, 4799-4813' 4888- 06, 4921-53, 4973-91, 5054-73, 5113-43, 72-81, 5199-5210, 5220-39, 5281-95' W/18 Z. 5335-51, 5361-75, 5386-93, 5419-31, 54 33. 87, 5499-5513' W/16 SPZ.		DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
		4405-4813'	71,500 gal. wtr. & 71,500# sd.
		4888-5295'	150,000 gal. wtr. & 150,000 sd.
		5335-5513'	70,000 gal. wtr. & 60,000 sd.
		77-2896-2992'	75,000 gal. wtr. & 70,000 sd.
PRODUCTION		2896-2907, 2908-2919, 2926-2937, 2938-2	

DATE FIRST PRODUCTION	PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)	WELL STATUS (Producing or shut-in)
48,2960-2972,2979	-2992' W/12 SPZ.	Shut-in

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
PC 4-21-81							
MV 4-16-81	9-26-77	Old test	After Frac gauge		3955 MCF/D		
FLOW-TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
381	PC SI 381						
398 648	SI 660	→		MV 3145, pc	1176		

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

TEST WITNESSED BY

35. LIST OF ATTACHMENTS

Gabe Archibque

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED H. P. Hines

TITLE Drilling Clerk

DATE MAY 7 1981
April 27, 1981

DATE _____
FARMINGTON DISTRICT

*** (See Instructions and Spaces for Additional Data on Reverse Side)**

BY KS

NMOCC

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal or State office, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form should be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be issued by, the Federal or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, etc.) and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. These items should be listed on this form, see item 35.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal instructions or Federal office for specific instructions.

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form: **Item 22 and 24:** If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, a well completion interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) or log for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of each stage of cementing. (See instructions for items 22 and 24.)

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instructions for items 22 and 24.)

eral agency or a State agency, and the number of copies to be obtained from, the local Federal types electric etc.), formations. Consult local State and in any attachments. Item 24 show the producing form, adequately identified, the cementing tool.

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